Evidence-Based Screening Tools Available to Pupil Services Professionals



For more information from the School Social Work Practice Guide visit: http://sspw.dpi.wi.gov/sspw_sswguide

The first five screening tools listed below are in the public domain and universally available. The GAIN-SS is available at no charge to Wisconsin pupil services professionals through an agreement between the Wisconsin Department of Health Services and Chestnut Health Systems, Inc. The Columbia Depression Scale is available through the authors at no cost.

These tools are not designed to diagnose psychological disorders when used in isolation. However, clinically significant scores on any of these tools may warrant referral to a qualified, community-based professional for a full assessment.

$Center\ of\ Epidemiological\ Studies\ Depression\ Scale\ for\ Children\ (CES-DC)$

http://www.brightfutures.org/mentalhealth/pdf/professionals/bridges/ces_dc.pdf

The CES-DC is a 20-item self-report depressions inventory. Questions focus on how the individual may have felt or acted over the past week. Scores range from 0-60 with a score of 15 or higher being clinically significant of depressive symptoms in children and adolescents.

Pediatric Symptom Checklist (PSC)

http://www2.massgeneral.org/allpsych/psc/psc_home.htm

The PSC is a 35-item self-screen used to identify cognitive, emotional, and behavioral problems in children and adolescents. There are two versions: parent and child. The items on each of the checklists are parallel (i.e., they ask about the same cognitive, emotional, or behavioral problems). The parent checklist can be administered regarding children as young as four years old. The youth checklist can be administered to adolescents beginning at age 11 years. Scores may range from 0-70 on both checklists. A score of 28 or higher on the parent checklist indicates psychological impairment for children ages 6-16 years. For children ages four and five years, the cutoff score on the parent checklist is 24 or higher. The cutoff score for the youth checklist is 30 or higher. If the youth leaves more than four items blank, the response is not considered valid. The PSC is available in 16 languages.

Spence Children's Anxiety Scale (SCAS)

http://www.scaswebsite.com/

The SCAS is a 44-item, self-administered tool used to assess anxiety symptoms consistent with the dimensions of anxiety disorder outlined in DSM-IV. These dimensions are generalized anxiety, panic/agoraphobia, social phobia, separation anxiety, obsessive compulsive disorder, and physical injury fears. The SCAS can be used with children, including preschoolers, and adolescents. There are three versions: child, parent (to be used in conjunction with the children's scale), and parent (preschool child). The items on each of the child and parent (child) scales are

parallel (i.e., they ask about the same problems related to anxiety) with the exception of the six, positively worded filler items on the child scale. The scales are available in 10 languages. The website includes extensive materials, including administration, scoring, and research articles.

Strengths and Difficulties Questionnaire (SDQ)

http://www.sdqinfo.org/

The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioral questionnaire that can be used with children and youth ages 3-16 years. It exists in several versions to meet the needs of researchers, clinicians, and educators. All versions of the SDQ ask about positive and negative attributes in the areas of emotional symptoms, conduct problems, hyperactivity and inattention, peer relationship problems, and prosocial behavior. The scales are available in 67 languages. The website includes extensive information, including scoring, uses, articles, and norms.

CRAFFT Screening Tool

http://www.ceasar-boston.org/CRAFFT/index.php

The CRAFFT is a behavioral health screening tool for use with children and adolescents through age 20 years. The acronym is derived from key words in each of a series of 6 questions developed to screen adolescents for high risk alcohol and other drug use disorders simultaneously. It is meant to assess whether a longer conversation about the context of use, frequency, and other risks and consequences of alcohol and other drug use is warranted. This tool is recommended by the American Academy of Pediatrics' Committee on Substance Abuse for use with adolescents. The CRAFFT is available in 10 languages.

Global Appraiser of Individual Needs – Short Screener (GAIN-SS)

http://sspw.dpi.wi.gov/sspw_pupilsvcsgainss

The GAIN-SS is an evidence-based, brief survey developed by Chestnut Health Systems that identifies needs for further assessment in the areas of mental health, substance abuse, and anger management for adolescents and adults. The electronic version was designed specifically for use by school-based, pupil services professionals.

Columbia Depression Scale

http://lphi.org/CMSuploads/Columbia-Depression-Scale-64716.pdf

The Columbia Depression Scale screens adolescents ages 11 and older using parallel youth and parent instruments for both depression and suicide. This tool may be used at no cost with permission from the authors. Contact Prudence Fisher at fisherp@nyspi.columbia.edu.